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ABSTRACT

The paper reports on a study of disabled children attending ordinary schools in Peshawar, North West Frontier Province, Pakistan. Results revealed the proportion of disabilities (2% of the total enrollment) in terms of the highest (speech impairments--37.6%) to the lowest (epilepsy--1%). The general attitude of administrators and teachers toward the integration of disabled children into normal schools was favorable. Five suggestions came from staff interviews, including the importance of transportation and practical attention to the physical environment. As followup, a society for Integrated Education of Handicapped Children was formed. Intervention on the part of social workers was advocated to help ease the handicapped student's adjustment to ordinary schools. Preliminary recommendations based on the study's findings are outlined in terms of governmental and school strategies. (CL)

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PRELIMINARY REPORT ON ACTION STUDY FOR INTEGRATED EDUCATION
OF HANDICAPPED CHILDREN

(sponsored by the National Council of Social Welfare)

The attached report summarises the results and follow-up of a study on children with disabilities attending ordinary schools in Peshawar, North West Frontier Province.

Approximately 2% of the ordinary school population were reported by their teachers as having a noticeable impairment. This would suggest a figure of 200,000 disabled children attending ordinary schools on an all-Pakistan basis. There is good reason to suppose that the number is in fact much higher. But even if the figure were lower, there are still far more disabled children in ordinary schools than there are attending special schools. "Integrated education" is already taking place in a casual, non-planned way.

The Government of Pakistan has announced its intention of spending Rs. 835 million (US dollars 60 million) on special education and rehabilitation development in the five years from 1983 to 1988. On the basis of the present study, it would seem reasonable that some proportion of the total be allocated for further investigation and encouragement of integrated education, and for implementation of the recommendations made herein. It is anticipated that the study findings will be of interest also to other developing countries where the needs of disabled children for education and vocational training vastly exceed the resources available to provide such facilities.

Publication of the full report, which is intended to incorporate a literature review, additional detail and opinion data, teacher orientation notes and other relevant material, is planned for late 1984. Comments on the present preliminary report will be most welcome.

M. Miles

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PRELIMINARY REPORT ON ACTION STUDY FOR INTEGRATED EDUCATION
OF HANDICAPPED CHILDREN

(Sponsored by the National Council of Social Welfare)

Introduction

During the 1970s it was increasingly recognised by special education and rehabilitation professionals that the majority of children with disabilities can benefit greatly by following ordinary education classes and engaging in other activities normal for their age group in the company of non-disabled children wherever possible. For many children with physical disabilities, and a certain number with mild or moderate visual or hearing impairments and mild mental retardation, there is little or no reason why they should be excluded from normal school activities with very minor modifications. Such help as may be needed, whether in the form of conveyance, hearing aid, spectacles, special furniture or additional classroom assistance, can be provided at a cost much lower than that of a separate special schooling system.

During the past 100 years there has in fact been some exchange and cross-fertilization of ideas and practices between the normal and the special education systems in Europe, and it is now recognised that the inclusion of children with disabilities in the normal education system brings benefits also for non-disabled children. Indeed, it is doubtful whether the full integration of disabled persons in society, aimed at by the International Decade of Disabled Persons 1983-1992, can be achieved without the mutual learning, exchange and appreciation process beginning during school years.

Separate special schooling may be indicated for the more severely disabled children, and may also be useful for a short period of "acclimatisation" for disabled children who have not attended school before but who will subsequently transfer to integrated education in a normal school. It is estimated however that there are as many as 4 million children in Pakistan suffering from an appreciable degree of disability. In view of the difficulties experienced by economically advanced countries in providing an adequate coverage of special education and rehabilitation facilities to their disabled child population, it seems unlikely that there will ever be sufficient number of separate special schools in Pakistan to cater for all the children who suffer from disabilities. Since those disabled children who do not get any education or training are usually condemned to a lifetime of dependence or begging, the inescapable conclusion is that integrated education should be investigated and promoted.

The existing ordinary schools together with the teaching staff constitute a major resource in every part of the country, which could be utilised for the benefit of disabled children. Since the latter have no less right than anyone else to receive education and training, it should be so utilised. Schools where there are already some children with disabilities

attending should be encouraged to take more, and the children should be encouraged to persevere to the successful conclusion of their schooling. Families should be encouraged to send their disabled child to school. Schools which do not at present admit disabled children should be helped to begin. Joint activities between disabled and able-bodied children should be promoted in every possible way, for mutual benefit.

Study of Non-Planned Integrated Education

In January 1982 the National Council of Social Welfare, Government of Pakistan, commissioned a study by the Mental Health Centre Peshawar of disabled children attending ordinary schools. The objectives were: (1) to investigate the condition of disabled children attending or potentially attending normal schools in Peshawar, with particular attention to transport to and from school, the degree of integration, teacher and peer attitudes; and (2) to make recommendations for improving the education and welfare of such children and increasing the numbers benefitting from existing facilities. The investigation was to be undertaken by means of interviews and questionnaires with school principals, teachers and pupils of Peshawar schools. It was intended that a low key approach should be followed in order to avoid causing any nuisance in the schools and also to avoid drawing unwarranted attention to the disabled children.

It was believed that a sizeable number of disabled children could benefit from normal schooling, and that many of these children were currently prevented from school attendance by difficulties of daily transport, prejudicial attitudes and negative discrimination on the part of teachers and peers, physical difficulties due to design of school buildings, low teacher expectations, and the general lack of awareness on the part of parents and schools.

No other study of this field was known to have taken place in Pakistan, nor was there any accessible information covering a similar survey in any country of comparable socio-economic-educational development. The study being undertaken was therefore a pilot investigation in which it was not possible to predict all the difficulties which subsequently emerged nor to design the study to circumvent such difficulties. The first step to be undertaken was to secure authorisation from the Directorate of Education (Schools) NWFP for the study to be carried out, and this was very willingly granted by the Director.

The formal investigation began in February 1982 and continued for several months. From the results of these months of investigation it became clear that certain actions were indicated which would require a much longer time but which should yield a much more valuable experience. Instead of merely "counting heads" and recording opinions, the opportunity could be taken to follow up some disabled children both in the classroom and in their family situation and see how they got on over a longer period. This would

constitute "research and action", potentially a very much more valuable experience than purely academic research. This opportunity was therefore taken, as will be described subsequently. One consequence has been that the "study" is still continuing two years after the commencement, and the research report has not so far been completed. It is anticipated that a full report will be made by the autumn 1984, covering the initial study and subsequent two years of action. The present preliminary report has been necessitated by the period of delay and by the build up of interest in various quarters in the results of the study.

Basic Results

The study was conducted in 34 schools of Peshawar Cantonment and Peshawar City, of which 28 were Government schools and 6 private. There were 16 primary, 9 middle and 9 high schools, with 18,042 pupils enrolled aged 5 to 19 years. The children reported by teachers as being disabled numbered 360 (i.e. 2% of the total enrolment). The proportion of disabilities reported was as follows: speech impairment 37.6%; physical disability 33.2%; visual impairment 20.8%; hearing impairment 5.0%; weak intelligence 2.4%; epilepsy 1.0%. A few children suffered from more than one impairment.

At the time of the study, the pupils reported to be disabled were studying in the following school classes: 1st, 63; 2nd, 52; 3rd, 46; 4th, 39; 5th, 59; 6th, 40; 7th, 27; 8th, 14; 9th, 9; 10th, 11. The origin of the disability was attributed by the children as follows: disease and accident 53.5%; disabled from birth 40.6%; not known 6%. The 360 children reported that they had 1,977 brothers and sisters, among whom were 99 (5.0%) with disabilities.

Among the children with physical disabilities were 94 with lower limb impairment, among whom 21 reported that they could walk easily; 40 could walk with a slight limp; 27 reported difficulty in walking; 6 were unable to walk. Among 32 children having impairment of their arms or hands, 14 reported that they could do their schoolwork easily; 9 could work with difficulty; and 9 could work with only one hand. Among 148 children with speech impairment, 107 had a slight lisp; 17 could be understood only with difficulty; 19 could be understood only by people very familiar with their speech; 5 were completely incomprehensible even by close family or friends. Among 79 children with impaired vision, 51 reported that they could work without difficulty, while 28 reported difficulty in working.

Among the disabled children, 95% reported that the attitude of their fellow pupils towards them was encouraging while 5% reported that the attitude towards them was discouraging. Concerning participation in activities outside the classroom, 87% of the pupils reported that they did take part in such activities with the other children, while 13% reported that they did not participate.

The great majority of the pupils travel to school on foot (78.2%). The remainder come by personal vehicle (10.2%), bus (7.7%), tonga/rickshaw (3.3%). Among the 94 children having some lower limb impairment, nevertheless 73 (77%)

proceeded to school on foot. For 83% of the children with disabilities, the distance from their home to the school was reported to be less than one kilometre. A distance between one and three kilometres was covered by 9% of the children, and 8% needed to travel more than three kilometres. Difficulty in travelling to school was reported by 14% of the children, the greater number of whom (36 out of 54, i.e. 67%) were children with lower limb defects.

The general attitude of school principals and teaching staff was favourable towards the integration of disabled children into normal schools, but staff claimed that they would prefer the method of having special classes within normal schools rather than having the disabled children following exactly the same lessons seated with non-handicapped children. However, in practice this did not take place. The disabled children under investigation were treated in the same way as all the other children and followed the same classes. It was observed that in some cases the class teachers actually joined in teasing the disabled children. School staff seemed to be keen to take additional training in order to learn methods and techniques for managing their classroom with disabled children in it. In the absence of any specialised training, the disabled children are thrown in with the rest, and sink or swim largely by their own efforts. It was noticed that the great majority of them managed to swim rather than to sink.

Suggestions specifically arising from the interviews with staff fall into five main categories:

- 1) It was recommended that rehabilitative facility or equipment should be provided to remedy specific impairments, e.g. spectacles, hearing aids, physiotherapy/surgery, speech therapy.

- 2) It was recommended that some help be given with daily conveyance to and from school, or that at least disabled pupils should be given seats in schools near their homes.

- 3) It was recommended that class teachers should show a sympathetic attitude and should give some measure of individual attention to the disabled child. Other pupils should be discouraged from teasing the disabled child.

- 4) Practical attention to the physical environment was recommended e.g. to ease mobility for the physically disabled by avoiding putting them in upstairs classrooms; and by giving seats near the front of the class to those with impaired hearing or vision.

- 5) Prevention of disabilities by immunisation was recommended, and also a regular check-up by school health service with individual medical records for every pupil.

Follow-up of Study

From the basic results of the investigation it became clear that a number of aspects of the study needed to be followed up in detail and action needed to be taken on an individual basis with many of the disabled children attending ordinary schools. The study had uncovered some basic facts, figures

and opinions, but left unanswered many questions about how the disabled children get along in school and how they might be helped to persevere and derive greater benefit from their schooling, and what might be done to increase their enrolment and to assist the schools to cope with any difficulties arising. In order to investigate further, it seemed most beneficial to involve people from several disciplines, e.g. educationists, social workers, psychologists and specialists having experience with disabled children.

It was therefore decided that a Society for Integrated Education of Handicapped Children should be formed with representatives from the above fields of expertise, which should undertake the continuation and follow-up of the initial survey and should seek to involve a larger number of schools and individuals towards the overall goal of integrated education. After several meetings the Society was constituted with the following stated aims:

- 1) To promote the integration, education and training of handicapped children and young persons in normal Government and non-Government educational and vocational institutions by all available means.
- 2) To provide financial and professional assistance to families with handicapped children and young persons in order that they may benefit from integrated education.
- 3) To encourage and promote the participation of rehabilitation workers, therapists, medical personnel and their assistants in the normal educational system, in order to minimise the handicapping consequences of impairments.
- 4) To campaign for improvement in the school medical service with a view to the early detection and prevention or minimisation of impairments in schoolchildren.
- 5) To promote and support all forms of educational, vocational, cultural or recreational activity in which handicapped and non-handicapped children and young persons take part jointly.
- 6) To raise funds, to engage paid staff and to conduct studies and publish the results, in the furtherance of the above aims and objectives.

One ordinary private school in Peshawar, Asbar's High School in University Town, was already known to have a deliberate policy of admitting a proportion of disabled children (currently 30 disabled children among 400 total enrolment) and it was decided that the Society for Integrated Education of Handicapped Children should make its first input at Asbar's High School by supporting the fees and expenses of some disabled pupils and by financing the employment of a social worker who would give extra attention to the disabled children in the school, monitor their progress, study their problems, liaise with their families, and report on the situation with suggestions for action and for improvements. It was further decided that a second social worker should be employed who would follow up the N.C.S.W. study, taking action along the lines suggested by that study, under the guidance of the Committee.

Grants were provided by the United Nations Ladies Association and by Christian Aid of London through the Mental Health Centre Peshawar to initiate these activities, and from the beginning of September 1982 two social workers were employed, Mr. Sibghat-ur-Rehman (who had conducted the original N.C.S.W. study) and Miss Yasmin Fazal. It had been decided by the Committee that registration with the Directorate of Social Welfare should be pursued, but this was subsequently deferred until such time as the nature and activities of the Society were more clearly established and understood. It had become apparent that certain other Associations involved in providing special schooling for disabled children felt threatened by the existence of the Society for Integrated Education of Handicapped Children, and apparently believed that the Society might undermine or remove the necessity for their own existence. Over a period of 20 years it would seem possible that the need for specialised institutions might diminish, as more disabled children would be integrated into the mainstream of education, but in fact in the present situation there would unquestionably be a far greater demand for both specialised and integrated education than could be met by the existing resources. Nevertheless, in order not to cause any difficulties the question of registration was deferred to a more suitable time.

Activities of the Social Workers

No model existed for the presence and activities of social workers in ordinary schools, and the Committee of the SIEMC discussed at length the nature of the work to be undertaken. It was realised that the project was an experimental one and that it remained to be discovered what the most beneficial approach might be. It was decided that initially Miss Yasmin Fazal should prepare case histories of the disabled children attending Asbar's School and should familiarise herself with any problems they might have by observation and discussion with their class teachers and their families. She would undertake whatever action might be required in the light of her initial findings.

It was anticipated that two types of intervention might be required: (a) short term action to overcome particular problems, e.g. transport, lack of fees, need for an aid such as spectacles to be provided etc; (b) longer term remedial or supplementary teaching in order to compensate for the difficulty the disabled child might experience in keeping up with the other pupils. The ordinary class teacher could not be expected to provide either sort of help in the normal course of classroom teaching, and school principals could not be expected to admit many disabled children to their school if they knew that this sort of help would be needed yet had no means of supplying it. It was understood that the first type of intervention would be more within the capacity of the social worker employed who had no special training in this field. She could also discuss with teachers and parents the possible future of each disabled child, and engage in advocacy for the child so that parental expectations might be raised beyond the apathetic level.

It was decided that if Miss Vasmin Fazal were to prove successful in some of the objectives during a period of several months at Asbar's School, so that the need for short term intervention there had been met, it would be appropriate for her to move on to another school with a cooperative, interested principal and continue similar activities on the basis of the experience gained. (This did in fact take place.) Meanwhile the second social worker, Mr. Sibghat-ur-Rehman, should re-visit the schools he had previously surveyed and find out what had happened to the 360 disabled children identified and should undertake to sensitise the school teaching staff to the special needs of these children and to arrange for their rehabilitative treatment where necessary on a more mobile basis than was being tried at Asbar's School. Thus the two social workers would experiment with different approaches, the one being static for a few months in a single school while the other moved between a number of schools. These efforts were in the nature of a demonstration to the Government of how a very large number of disabled children could be helped to integrated education using existing resources with a low cost supplementary intervention.

Evaluating the experience reported by the social workers, it is evident that there is a great need and opportunity for mobilisation of existing resources, advocacy on behalf of disabled children, sensitisation of school staff to the special needs of some of their pupils, and raising the awareness of families. The social workers, both of them graduates with M.A. Social Work from Peshawar University, had no special training in the field of integrated education but they worked willingly in following up the disabled children and talking with all the people involved. Their role was rather a delicate one, since they had no official position and were working experimentally by permission of the individual school principals. They needed to win the confidence of the school staff and the pupils' parents and to achieve results by persuasion. To a large degree they seem to have been successful.

Most, if not all, of the actions taken as a result of the social workers' activities could have been taken without their intervention, but the fact is that these actions were not taken until they entered the situation as catalysts and mobilisers. The social workers needed a lot of tact and sensitivity in dealing with the school staff, in order to draw their attention to special needs of the disabled pupils without appearing to criticise the teachers or appearing to tell them how to do their job. Most of the teachers in fact seemed to welcome the social workers and to be glad of some assistance and advice. Most of the school principals were well disposed towards the disabled pupils, and quite prepared to consider any suggestions for minor modifications of their normal school practice which would facilitate the education of those with special needs.

In discussion between the SIEHC Committee and the social workers it was pointed out that while good liaison needed to be maintained between the social worker and the head teacher, this should be effected in such a way that the class teachers did not feel that reports were being made behind their backs.

The danger was also recognised of the social workers being used as spare teachers, in view of the staffing problems experienced in many schools. The social worker would no doubt benefit from gaining some classroom teaching experience in this way, and thereby also would gain credibility with the normal teachers, but it was necessary for school principals to understand and accept that this could be only a temporary and occasional measure, otherwise the point of having a social worker would be lost.

By the time the social workers had gathered some experience, the SIEHC Committee had grown to include the principals of six schools (two of them special schools) together with three social workers and the parent of a disabled child attending a normal school. This therefore provided a useful forum of experience in which the accumulating data and reports from the social workers employed by the Society could be evaluated and further directions given. After nine months' employment Mr. Sibghat-ur-Rehman resigned to join another project in the disability field, as Rehabilitation development Officer of the FAMH/UNICEF Community Rehabilitation Development Project. Miss Yasmin Fazal, after working for a few months in each of three schools by arrangement with the respective principals, also resigned in order to get married. In October 1983 a third social worker was employed, Mr. Munir Akhtar Qureshi, who studied the experience of the first two employees and was in fact introduced to the work by Mr. Sibghat-ur-Rehman who continued to take an interest in the Society in addition to his new commitments.

A prominent feature of the social workers' activity is to persuade families to take elementary steps towards rehabilitation of their disabled child, and a referral network has been built up of rehabilitation specialists who may be willing to give their services free or on a concessionary basis to children referred by the Society. This network includes ophthalmologists, orthopedists, the physiotherapy clinic at the Mental Health Centre, a speech therapist, ENT surgeons etc. When it is pointed out to families that the child should have its eyesight or hearing tested, receive physiotherapy or be checked over by a specialist on developmental delay, the parents often object that this will cost more than they can afford. Even if they can afford the consultation they fear that they will be unable to pay for treatment or rehabilitation aid, so the initial investment in consultation will be without practical outcome. This objection is overcome by the SIEHC social workers offering to meet a proportion of the costs involved, on whatever basis the family choose: whether 20%, 50% or as much as 80% of the costs can be met from SIEHC funds.

Families who have come to regard their child's disability as an unfortunate but inevitable fact, a source of some shame or of indifference, find it remarkable that the child is important enough to merit the attention of a social worker and that a charitable society is prepared to share with them in the cost of rehabilitative treatment. In most cases, the parents secretly hope that perhaps something could be done, and they may indeed once have embarked on visits to doctors, as well as to pirs and shrines seeking a

cure. When a family has spent large sums without positive results it may develop a resistance to any further suggestions of therapy. The social workers then need to employ a little "sales technique" on behalf of the child, who may otherwise become the victim of his parents' loss of hope. The actual financial contribution of the Society is in most cases small, but the contribution in terms of catalysing and motivating the parents is large. In a previous survey of disabled children conducted by the Mental Health Centre, families were asked if anybody had ever offered them any help with their disabled child. Negative replies were made by 97% of those questioned. There is an enormous need for someone to take an interest in these families, even if only to the extent of listening to their problems and worries.

Practical outcome of the Study and Follow-up

Apart from the actual results of the study and the data and opinions gathered, there were a number of practical achievements and results of the whole exercise over a period of two years:

- 1) Approximately 50 schools in Peshawar (and also Mingora) were visited and were apprised of the aims and objectives of integrated education.
- 2) About 200 disabled children attending ordinary schools have been assisted to obtain rehabilitative treatment and aids both by encouragement and by financial help.
- 3) A major exercise in public awareness has been undertaken with hundreds of outlets in families, school staff, committee members, the social work department of the University, and by correspondence in the press.
- 4) Apart from the 35 Peshawar schools surveyed (and 7 additionally in Mingora), requests have been made by principals of other schools who had learnt about the survey and activities of the SIEHC and who wished to benefit from some attention being paid to their disabled pupils. These additional contacts have been followed up.
- 5) The management of one private school not previously involved in this field, after reviewing the activities of the SIEHC, decided of its own volition to employ a graduate social worker on a regular basis to relieve any welfare problems of its pupils.
- 6) The Education Department, Government of NWFP, has been made more aware of the needs of disabled pupils in normal schools and as a result has requested that a series of lectures be given at inservice teacher training courses arranged from time to time in order to help teachers to make better provision for their disabled pupils.
- 7) Rehabilitation professionals have been sensitised towards the "normalisation principle", that disabled children should lead as normal a life as possible and should as far as possible enjoy equality of opportunity with all other children.

8) The SIEHC facilitated transmission of 500 child-sized spectacle frames from the USA based organisation Aid to Blind Children International. These spectacle frames have been made available through the ophthalmological department of Mission Hospital Peshawar.

9) The opportunities created by the SIEHC have provided further supervised fieldwork and experience in the rehabilitation field for M.A. Social Work graduates, some of whom will make a career in this field as a result of this initial experience.

10) Following participation in the National Seminar on Vocational Rehabilitation in December 1983, fruitful contact was made with the principal of the Government Vocational Training Institute, Peshawar. It is Government policy to encourage vocational rehabilitation for disabled persons, and the offer has been made to give training to any suitable disabled young men whom the SIEHC might recommend to the Vocational Training Institute.

11) Among a series of radio broadcast scripts prepared for dissemination to rural areas of NWFP, one programme has been devoted to the subject of integrated education and takes the form of an interview with a head teacher who is admitting disabled children to his school.

Critique and Evaluative Discussion

Criteria of Disability

The first question that might be raised concerning the original survey is that of criteria for assessing disability. The method used was unsophisticated and relied entirely on the school teachers' perception. Principals and teaching staff were asked, "Do you have any child in your class who is disabled?" The investigator then actually saw the children so designated, and verified that they did in fact have some impairment. A rough classification was attempted concerning practical ability, e.g. "able to walk", "speech difficult to understand".

"Studies of pupils' eyesight performed by medically qualified investigators in schools in Islamabad and in Peshawar reported in the one case 10% and in the other case 20% of the pupils as suffering from impaired vision. Undoubtedly if controlled hearing tests were to be carried out on schoolchildren there would be a great deal of hearing impairment discovered. During the follow up of the study a number of pupils were discovered to be suffering from emotional disturbance sufficient to have a noticeable effect on their school performance, although this was not a category originally reported by teachers when asked about "disability". Thus the 2% of pupils perceived by their teachers as being disabled must be only a fraction of the total of children suffering impairments. On the other hand among the 360 children designated as disabled, as many as 233 (65%) reported that their impairment was not of such a degree that it would hinder their school work.

It was not the purpose of the present study to generate data on disabilities. The focus was rather on abilities; specifically, the ability of children with various types and degrees of impairment to follow ordinary school classes and to be integrated with able-bodied children. The findings were sufficient to indicate that on the national scale large numbers of children who are "disabled from normal functioning" are not disabled from ordinary schooling and are in fact already attending schools without any special attention having been paid to their situation.

Selective Drop Out

It was suspected that the children with disabilities were more likely than non-disabled children to drop out of school for a variety of reasons: academic failure, transport difficulty (especially at transition from neighbourhood primary school to more distant secondary school), negative attitudes from fellow pupils or teachers, unwillingness of parents to continue meeting expense of schooling. All these are common reasons for failure to persist with schooling, apart from "negative attitudes"; the latter reason is experienced also by other disadvantaged groups such as children of the religious minority communities and of itinerants. Furthermore it needs

to be pointed out that during six years' experience providing special schooling to mentally retarded and multi-handicapped children at the Mental Health Centre Peshawar, it was estimated that approximately 50% of the children ever enrolled have dropped out for a variety of reasons.

The results of the present study give some grounds for the suspicion of selective probability of dropping out by disabled children, but the precise questions were not asked and the relevant data was not available to give a definite answer. In any case, it was clear from the study and follow up that some disabled children were dropping out because of difficulties experienced, and that the activities of an interested social worker could be crucial in helping the disabled child to persevere in the education system.

The Government of Pakistan has now passed an Ordinance requiring employment of a 1% quota of disabled persons by large employers, and the Government is revising its own rules for employment of civil servants in order to take a proportion with disabilities. Job opportunities for educated disabled persons are likely to increase, and it is vital for the future integration of disabled persons in society that there should be an adequate supply of disabled school leavers having matriculation and/or further qualifications. Creation of job opportunities and supply of adequately educated candidates needs to proceed simultaneously in order to avoid bottlenecks, frustrations and wastage.

Representativity of sample

The study was carried out in Peshawar, a city of 600,000 population, and mostly among boys' schools. Peshawar is not altogether a typical city of Pakistan, and city results are not necessarily representative of the 70% of the national population residing in rural areas, nor is the situation of boys' schooling identical with that of girls'. Nevertheless, among educationists questioned informally, the general impression was that similar results might be found all over Pakistan, in urban and rural areas and among boys and girls.

An attempt had been made during 1981 to mobilise the Federal and Provincial Departments of Education to conduct a questionnaire survey in Government schools to acquire basic data on attendance of disabled children, but this disappeared into the quicksands of bureaucracy. A previous study was conducted by the Mental Health Centre in 1980 of 1,340 disabled children comprising 670 (50%) physically disabled; 355 (26%) hearing and speech defects; 183 (14%) mentally retarded and 132 (10%) visually impaired. Those who reported attending or having attended school amounted to 22%, divided by disability as follows: physically disabled 26%; visually impaired 23%; speech/hearing defects 18%; mentally retarded 8%. Approximately 20% of the disabled children surveyed were in any case below the age for school attendance.

Attitudes

The report by disabled pupils of their fellow pupils' attitudes is of considerable significance. The question was of course unsophisticated, but the overwhelming majority reporting positive attitudes was not necessarily predictable and it is to be noted. It might be argued that the feeling of classroom solidarity in face of an outside inquisitor might predispose the children towards a positive response. But there were evidently those (5%) who were not so disposed. Conversely it is probable that a proportion even of able-bodied children would be picked on, teased or bullied by their class fellows, and some among the 5% of disabled pupils reporting negative attitudes might have come in this category regardless of their disability.

In a study conducted in 1962 by the Mental Health Centre on "Attitudes towards Disabled Persons following IVDP 1961", surveying 276 men and women in both urban and rural areas of Peshawar district, the question was asked whether disabled children should be given reserved seats in educational institutions. Response was 80% positive (85% among urban respondents). There were 48 respondents who disagreed, on the following grounds: special schools are best for the disabled (10); disabled children will be mocked and teased in a normal school (10); the disabled will get an inferiority complex, or will be unable to adjust (8); the disabled children will not benefit from normal schooling (7); the normal system, children and teachers will be disturbed (6); admission should be on merit only, and standards should be kept up (4); many normal children cannot gain admission for lack of places (3).

It seems likely that the majority of these objections were in fact rationalisations of prejudice. The response reported by disabled children themselves in the present study, who have daily experience of casual integrated education, seems very largely to dismiss the popular notion that disabled children would be subjected to intolerable teasing and cruelty by their fellow pupils, and would develop inferiority complexes. There will certainly be some negative attitudes and actions experienced by disabled children in ordinary schools. Against that must be set the fact that for the vast majority of disabled children the alternative is to have no schooling at all. Such an alternative seems a great deal more likely to reinforce feelings of inferiority, while the able-bodied children will be deprived of the opportunity to discover that children with disabilities are mostly quite normal in every way apart from their disability.

Difficulties encountered

The original survey ran across the end of one school year and the beginning of the next, which made some difficulties both in gathering data and subsequently in following up the disabled children. The principals and teaching staff were almost all cooperative and some were quite enthusiastic about the nature and purpose of the exercise; however their ability to provide basic data about school and class-wise enrolment, and subsequently to assist in contacting

families and following up the disabled children, varied considerably. Class teachers also varied in their capacity to perceive the situation from the point of view of the disabled pupils. There were some who were very supportive without making a fuss over the child, whereas others actually joined with pupils in teasing and separating out the disabled child.

The whole two year exercise has been rather loosely managed, due to constraints of time and resources, and the social workers have had to set their own goals and pace of work to a large extent. The change of personnel did not promote consistency of approach, though fortunately the original investigator remained in close touch with the project. Since the exercise was intended partly as field training for the social workers and partly as a realistic demonstration for the Government, the presence of a due quantum of difficulties may be counted rather as a virtue.

Strategic Importance

The Government of Pakistan in its Sixth Five-Year Plan (1983-88) declares the intention to make a major step forward in providing special education and rehabilitative facilities for disabled children and adults. The plan appears to centre upon specialised facilities, both upgrading existing schools and starting new ones. In either case, the major bottleneck will be in discovering staff with specialist skills and experience. Even if the plan were to achieve its goals within the stated period, which nobody in the Government realistically anticipates, it would reach no more than 10% of the disabled child population, and at considerable cost (Rs. 835 million) which might not subsequently be sustainable.

If in the four years remaining of the sixth plan, the Government were to create 20 posts distributed between the Provinces, engaging a mixture of male and female graduates in social work, psychology, sociology and medicine, and setting them to work on a similar programme to that piloted by the SIEMC employees, the cost of salaries, some transport and administration would not exceed Rs. 20 lakhs. The investment would unquestionably pay for itself in terms of disabilities prevented, schooling provided for and persisted in by disabled children, community awareness raised towards integration of disabled persons generally, and a large body of comparative data generated on the basis of which a major plan for integrated education should be formulated for the seventh plan.

PRELIMINARY RECOMMENDATIONS

When the Literature Review has been completed, ranging over integrated education services in a number of countries, it should be possible to amplify the recommendations beyond reporting those suggested by the present study and follow up. What follows is therefore only a sketch of some realistic possibilities for action.

Government

- 1) Findings of the present study should be given widespread discussion, and reactions coordinated for incorporation in the final report.
- 2) Government at Federal and Provincial level should coordinate action between Planning, Education, Health and Social Welfare, and should create at least 20 posts as recommended above ("Strategic Importance") with the least possible delay, in order to maximise utilisation of existing community resources for integrated education.
- 3) Education Departments should as soon as possible incorporate into Teaching Certificate curriculum and Bachelor of Education courses an element on pupils with disabilities in the ordinary classroom. Inservice courses on the same topic should be prepared for experienced teachers.
- 4) Schools Health Service. It is the Government's intention to raise the health status of the entire child population, both as a humanitarian enterprise and a sound economic investment. Given the additional investment being made on schooling for approximately 50% of the nation's children (with the intention to reach 100% as soon as possible) it makes economic and educational sense to insure the investment by a properly functioning Schools Health Service. The full extent of educational wastage due to poor health is not known but it is probably very large. A great deal of the loss could be retrieved by preventive measures, and it is beyond doubt that a Schools Health Service would pay for itself in terms of retrieval of wastage without even considering the loss of employment time by families in visiting doctors and the cost of imported pharmaceutical products. The educational system itself will function more effectively by treatment of teaching staff as well as the pupils.

Schools: Strategy

There are more than a dozen ways in which integrated education can be carried out, which consist of permutations of four main types:

- 1) Disabled children in ordinary classes: teacher and other pupils giving some extra help as required. Teacher may have had short inservice specialist training.

- 2) Disabled children in ordinary classes: specialist teacher visits periodically and assists ordinary teacher or takes disabled children out for special attention.
- 3) Special class attached to ordinary school, some integrated activities outside of classroom.
- 4) Close collaboration between special school and ordinary school, with disabled children attending both alternately.

Given the size and diversity of Pakistan, there is ample scope for all four methods to be used experimentally in different places, and in due course the benefits or disadvantages of each will become more apparent. There is probably no single "best method". In different circumstances and with available resources, various methods may achieve better or worse results. It would in any case be possible to argue for quite different goals of integrated education, e.g. the extent to which integration of disabled persons and society requires conformity by the disabled persons, as opposed to the development of increased flexibility on the part of society. Depending on the goals being aimed at, different methods might be appropriate.

Schools: Classroom Practice

Whatever method is used, it is of prime importance that the persons involved should be adequately prepared. The classroom teachers should if at all possible initially be volunteers. Schemes for introducing or increasing the number of disabled pupils may best begin as pilot projects, requiring mature, experienced teachers who will volunteer to take a proportion of disabled pupils and to monitor their progress. It should be acknowledged from the start that these projects will not be without some difficulties, and that skill and competence will be required. Schemes should never be foisted onto unwilling teachers, who are likely to resent what they see as an additional burden. Wherever possible, a short series of talks/discussions should be held between special educators and ordinary teachers and between teachers having previous positive experience of integrated education and those teachers about to start new developments.

The disabled children and the ablebodied pupils should be guided from the start as to what to expect. The essential here is to get the points across without making too much fuss over the disability. The disabled child must understand that he or she can expect no concessions on discipline and behaviour other than perhaps a little leniency on timekeeping if he has problems of mobility. Usually, the disabled child will be only too glad to conform to the normal standards of behaviour and to avoid appearing different. There will be some exceptions, who have been spoilt or indulged at home, and who will have to learn that their disability cannot excuse ill behaviour. The ablebodied children must be informed that teasing and mocking will not be permitted, but that in

every other respect they should treat their new class fellows normally. It helps, of course, if there are one or two members of the teaching staff suffering from disabilities, so that pupils will find nothing extraordinary about the presence of a disabled person simply getting on with his work.

Families both of disabled and able-bodied pupils also need to be prepared and introduced to the concept and development of integrated education. With the first group, it is important that they should at home reinforce school policy and should have realistic expectations and make realistic demands on the disabled child. Among the second group, there may be some who fear that their own child will "catch" a disability, or that somehow the work of the school will suffer. To these families it may be pointed out that casual integration has been going on from time immemorial without any of their fears materialising.

It may be assumed that very small resources will be available for physical modifications of the school environment. However, a great deal may be achieved by the application of common sense to the available resources. Often, all pupils will benefit from modifications effected in response to the presence of disabled children. For example, where some pupils have visual impairment, it is recommended that classrooms should be well lit (which benefits everyone) and that the children with poor vision should sit near the front of the class. (They should not necessarily sit at the front, since to do so may prevent them from gaining visual cues from their fellow pupils and may inhibit them from asking their neighbours for help.) Teachers should not hesitate to place a disabled pupil next to a reliable able-bodied pupil with the expectation that some help may be given.

For hearing impaired children, and also the visually handicapped who rely more upon auditory information, it is advisable that the acoustic quality of the school environment be raised as far as possible and that unnecessary, incidental noise be limited. Again, classroom seating may be so arranged as to assist the disabled child at no more cost than a little thought. The teacher should plan lessons to include visual representations to supplement the spoken word, and for the benefit also of the visually or intellectually impaired all drawings on blackboards or wallcharts should be large and clear. Teachers with hearing impaired children should adopt the habit of speaking with face fully visible, in order to facilitate lip reading, and should avoid standing in silhouette against a sunlit window which renders their features invisible.

Where physically disabled children are concerned, again a little thought can overcome many physical and mobility barriers. One child may best be seated by the door, where he or she can easily enter or leave without negotiating narrow lines of desks; another child may easily be capable of movement but is better seated away from the door to minimise the danger of being knocked down by the flow of children at the beginning and end of

lessons. Some children can manage staircases, in which case it may be good for them to practise doing so; while for others the barrier is insurmountable and classroom allocation may be changed to allow them to stay on one level. With pupils having a speech impediment, and this is likely to be a large category, it is recommended that teachers should ignore the speech problem but should give friendly attention to the child and help him or her to relax and gain confidence. This will necessitate the checking of teasing by other children, without making the stammerer too self-conscious. The same applies to children who have any emotional instability, mild epilepsy, facial disfigurement, and children who are naturally left-handed. In the latter case, the child should be allowed to use whichever hand he prefers without any attention being drawn to it. Where a child's family is beating or abusing him for using the left hand, the school teachers and principal should discuss the matter calmly with the parents and should point out the likelihood of their giving the child a psychological disability if they make a fuss over a perfectly natural phenomenon. If necessary reference may be made to religious teachers who will assure the family that there is no religious prohibition on the use of the left hand.

Most of the above recommendations merely require teachers to do their normal work a little more conscientiously and thoughtfully. For example, teachers should always keep an eye open for safety hazards, and this is reinforced when there are visually or intellectually impaired children about. The vast majority of teachers will rise to this challenge if it is presented to them in an appealing way and as both a professional and humanitarian concern.

Recommendations concerning rehabilitative aids, e.g. spectacles, white cane, braille, hearing aids, speech trainers, crutches, calipers, wheelchairs etc., have been omitted up to this point for two reasons: (1) In most places such aids are not available or affordable by families and no repair or servicing facility is accessible. (2) It is necessary to emphasise and reemphasise that both special education and integrated education are a matter of children, teachers and families learning, doing, practising and relating to one another. If teachers will understand this and will apply their minds to discovering how best to communicate with their pupils, facilitate their learning processes and invoke the family's cooperation as well, then half or more than half of the disability will have been overcome.

The remaining half may indeed be helped or removed by a technical aid. But the fact needs to be faced fairly and squarely that even in the technologically advanced countries at any one time a large proportion of rehabilitative technical aids are either lying broken, or need servicing, or have been outgrown, or have gone missing, or are not in use because the

potential user is embarrassed, depressed, or has got used to coping without the aid. In these circumstances, if the teacher-pupil relationship is good then the child will carry on learning; if bad, or if dependent on the aid or gadget, then the prospects are poor. The near-obsessional interest by both Government and non-Government organisations in Western rehabilitation gadgets is a form of delusion and an escape from the above realities. It is an escape from the initially more difficult but ultimately much more fruitful possibilities for teacher-pupil-family contact and learning.

In Conclusion

Within its own proper cultural, ideological and societal norms it is almost certain that Pakistan will during the next 20 years develop and experiment with a variety of forms of integrated education and vocational training, commencing on the basis that at least 2% of the present ordinary school population have perceptible disabilities yet are experiencing casual, non-planned integration with able-bodied children. The development of integrated education might proceed fitfully, in opposition and obscurity, with an inestimable loss of opportunity for hundreds of thousands of disabled children. Or it may proceed in an orderly way with appropriate investment in pilot projects, feedback and exchange, planning and extension. In the latter case, a very modest investment in mobilising and facilitating existing resources will pay off both in humanitarian terms, in economic terms and in achieving the ultimate goal of every modern, civilised society by integrating able-bodied and disabled persons for the common good at every level.

The choice now lies with Government of Pakistan, with the people of Pakistan, the educationists, the Disabled Persons organisations, the opinion shaping media, the families, and with the schoolchildren themselves, both disabled and able-bodied.

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Peshawar